

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. 10/589561	FILING DATE					
CLAIMS													
	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT			AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/				51		/				
2		/					52		/				
3							53		/				
4				/			54		/				
5				/			55		/				
6				/			56						
7				/			57						
8				/			58						
9				/			59						
10	/		/				60						
11				/			61						
12							62						
13							63						
14							64						
15				/			65						
16				/			66						
17				/			67						
18				/			68						
19				/			69						
20	/			/			70						
21				/			71						
22				/			72						
23				/			73						
24				/			74	/					
25				/			75		/				
26				/			76		/				
27				/			77		/				
28				/			78		/				
29				/			79		/				
30				/			80		/				
31				/			81		/				
32				/			82		/				
33				/			83		/				
34				/			84		/				
35				/			85		/				
36				/			86		/				
37				/			87		/				
38				/			88		/				
39				/			89		/				
40				/			90		/				
41				/			91		/				
42				/			92		/				
43				/			93		/				
44				/			94		/				
45				/			95		/				
46				/			96		/				
47				/			97		/				
48				/			98		/				
49				/			99		/				
50				/			100		/				
TOTAL IND.		↓		↓		↓	TOTAL IND.	4	↓	3	↓		↓
TOTAL DEP.		←		←		←	TOTAL DEP.	70	←	17	←		←
TOTAL CLAIMS							TOTAL CLAIMS	74		20			

PTO-1360 (REV. 11/04)

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